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## APPLICANTS

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NM

## \*\* CONTINUING DATA \*\*\*\*\*

NM

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

NM

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 02/12/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance	CA	5	25	5
Verified and Acknowledged	Examiner's Signature Initials				

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## TITLE

Support mobile device in asymmetric link environment

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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